

**BQC-93-042**

Date: June 30, 1993 BQC-93-042

To: Home Health Agencies HHA 12

From: Susan Wood, Deputy Director  
Bureau of Quality Compliance

Subject: Division of Health Standards and Quality Regional Program Letter No. 93-35

Attached is a copy of Regional Program Letter No. 93-35 from the Health Care Financing Administration Region V, Division of Health Standards and Quality. This letter provides information related to the use of a signature stamp by physicians for Home Health Agency (HHA) services. The letter also describes the conditions under which a physician may "fax" their signature to a HHA.

Please share this information with appropriate staff. Please direct questions to Stephen D. Schlough, Chief, Hospital and Health Services Section, Bureau of Quality Compliance at the above address or telephone him at (608) 266-3878.

SW/JJF/df 7835a.nm

Attachment

Cc: -BQC Staff  
-Office of Legal Counsel  
-Ann Haney, DOH Admin.  
-Kevin Piper, BHCF Dir.  
-HCFA, Region V  
-Illinois State Agency  
-Ohio State Agency  
-Michigan State Agency  
-Indiana State Agency  
-Minnesota State Agency  
-WI Coalition for Advocacy  
-Serv. Employees Internat'l Union  
-WI Counties Assn.  
-WI Assn. of Homes & Serv/Aging  
-WI Health Info. Mgmt. Assn.  
-Commission on Geriatric Health  
-WI Assn. of Nursing Homes  
-Bd. on Aging & Long Term Care  
-WI Homecare Organization  
-Bureau of LTC, DCS  
-Non-LTC BQC Memo Subscribers

Department of Health & Human Services

Health Care Financing Administration  
Region V  
105 West Adams Street  
15<sup>th</sup> Floor  
Chicago, Illinois 60603-6201

May 1993

Refer to: CO8

**Division of Health Standards and Quality Regional Program Letter No. 93-35**

**Subject: Use of Signature Stamp by Physicians for Home Health Agency (HHA) Services**

The plan of care and other physicians' orders for HHA patients require a physician's signature. Signature stamps are not acceptable. The Medicare home health conditions of participation specifically state that all physicians' orders must be signed. 42 CFR 484.18(c) states: "Drugs and treatments are administered by agency staff only as ordered by the physician. The nurse or therapist immediately records and signs oral orders and obtains the physician's countersignature. . . ."

The Medicare Home Health Agency Manual (HIM 11) also requires the attending physician to sign and date the plan of treatment/certification, HCFA Form 485, and states: "Rubber signature stamps are not acceptable." As an alternative, the physician's signature, which is required on the plan of treatment and orders, may be faxed to the HHA. The HHA is not required to have the original signature on file, but the HHA must obtain the original signature if an issue arises that requires verification of an original signature.

If you have questions regarding this issue, please contact your program representative.

/s/ William F. Pfeifer  
Branch Chief  
Survey & Certification Operations Branch  
Division of Health Standards & Quality